

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>W</i>	<i>32</i>	<i>2/15</i>
FORMALITY REVIEW	<i>AB</i>	<i>TC 900</i>	<i>03-01-01</i>
RESPONSE FORMALITY REVIEW	<i>P.B.</i>	<i>1078</i>	<i>05/11/01</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 u Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
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Claim	Date
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If more than 150 claims or 10 actions
 use additional sheets here